FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L09503

1. Corporation Name
CAMCO Productions Inc.

600001840956
-05/28/96--01036--021
***200.00

Principal Place of Business / Mailing Address
15175 Eagle Nest Lane #104
Miami Lakes Fla. 33014
US.

2. Principal Place of Business	2a. Mailing Address
21 15175 Eagle Nest Lane	26 15175 Eagle Nest Lane
Suite, Apt #, etc. 22 104	Suite, Apt #, etc. 27 104
City & State 23 Miami Lakes Fla.	City & State 28 Miami Lakes Fla.
Zip 24 33014 / Country 25 U.S	Zip 29 33014 / Country 30 US.

3. Date Incorporated or Qualified: 08/16/1989
3a. Date of Last Report: 1995
4. FEI Number: 65-0167767 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
Richard W Wasserman.
420 Lincoln Rd. #256
Miami Beach Fla 33139

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE
Signature of officer or director of corporation — Date — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P D ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	Cameron H Davis	1.2 NAME	
STREET ADDRESS	15175 Eagle Nest Lane #104	1.3 STREET ADDRESS	
CITY-ST-ZIP	Miami Lakes Fla.	1.4 CITY-ST-ZIP	
TITLE	ST D ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	John P Davis Jr	2.2 NAME	
STREET ADDRESS	15175 Eagle Nest Lane #104	2.3 STREET ADDRESS	
CITY-ST-ZIP	Miami Lakes Fla 33014	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	Harriet Davis Director	3.2 NAME	
STREET ADDRESS	15175 Eagle Nest Lane #104	3.3 STREET ADDRESS	
CITY-ST-ZIP	Miami Lakes Fla 33014	3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: H. Cameron Davis — 4/29/96 — 5/1/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)